

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jun 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000049582 (6)

1. Corporation Name

BAPLA CORPORATION IMP/EXP

Principal Place of Business

2350 N.E. 135TH ST.
APT. 410
N. MIAMI FL 33181

Mailing Address

2350 N.E. 135TH ST.
APT. 410
N. MIAMI FL 33181-3528

3. Date Incorporated or Qualified
06/26/1995

3a. Date of Last Report
05/01/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes

☒

Yes

☐

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

RAMIREZ, JOSE G.S.
2350 N.E. 135TH ST.
APT. 410
N. MIAMI FL 33181

10. Name and Address of New Registered Agent

81 Name

RAMIREZ, JOSE G.S.

82 Street Address (P.O. Box Number is Not Acceptable)

19500 W. OAK MT. DRIVE

83

84 City

MIAMI LAKES

FL

85 Zip Code

33016

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

Jose G. Soto

9/4/97

Signature of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

PD
NAME RAMIREZ, JOSE G.S.
STREET ADDRESS 2350 N.E. 135TH ST., #410
CITY-ST-ZIP N. MIAMI FL 33181

TITLE NAME ☐ DELETE

VD
NAME DE SOTO, ALICIA B
STREET ADDRESS 2350 N.E. 135TH ST., #410
CITY-ST-ZIP N. MIAMI FL 33181

TITLE NAME ☒ DELETE

STD
NAME CELIS, LUZ M.R.
STREET ADDRESS 2350 N.E. 135TH ST., #410
CITY-ST-ZIP N. MIAMI FL 33181

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PD
NAME RAMIREZ JOSE G.S.
STREET ADDRESS 19500 W OAK MT. DR
CITY-ST-ZIP MIAMI LAKES, FL 33016

VD
NAME DE SOTO, ALICIA B
STREET ADDRESS 2350 N.E. 135TH ST. DRIVE
CITY-ST-ZIP MIAMI LAKES, FL 33016

SECRETARY
NAME Miran Rojas Celis
STREET ADDRESS 19500 W OAK MT. DR
CITY-ST-ZIP MIAMI LAKES, FL 33016

4/6/17/97

900002215303

-06/18/97-01008-011

***173.75

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if applicable, or on an attachment with an address.

SIGNATURE

[Signature]

Jose G. Soto

4/6/17/97 (305) 545-5240

CR2E034 (9/96)